

REMARKS

Reconsideration of the application is respectfully requested.

I. Status of the Claims

Claims 4, 21, 24, 25, 26, 30-32, 35 and 36 were amended, and the amendments do not add new matter.

Claims 1-39 are pending.

II. Rejection under 35 U.S.C. § 102

Claims 1-5, 7-9 and 11-39 are rejected as anticipated under 35 U.S.C. § 102(e) by U.S. Patent No. 6,980,958 to Surwit et al. ("Surwit"). The Examiner states that Surwit discloses all of the elements of the above claims.

Applicant disagrees that Surwit shows all of the features of the claimed invention. Nevertheless, Applicant respectfully traverses this rejection by submitting a Declaration under 37 C.F.R. § 1.131(along with documentary evidence in the form of Exhibits A and B). The Declaration, signed by the inventor, states that the inventors completed and reduced to practice the invention as claimed in the present application prior to the earliest filing date of Surwit.

Exhibits A and B of the Declaration illustrates the format architecture for the method and system of Applicant's claims and describes the claimed features in detail. Exhibits A and B clearly describe each piece of the system, including receiving current information for each patient's visit and automatically calculating a new weekly dose medication regimen based on the received information. Exhibit A, Figure 1, and Exhibit B pages 1-12, describe all the elements of independent

claims 1, 21, and 37. Therefore, Applicant submits that he completed the invention, as embodied in claims 1, 21, and 37 prior to the effective date of Surwit, thus antedating this reference such that it is not prior art. Independent claims 1, 21, and 37 are therefore allowable.

Regarding dependent claims 2, 3, 5, 22, 23, 38, and 39, Exhibits A and B disclose that the information received includes at least one of a patient's current weekly anticoagulation medication dose, current international normalized ratio, and international normalized ratio goal, the new weekly dose medication regimen is based on at least one of the patient's current weekly anticoagulation medication dose, current international normalized ratio, and international normalized ratio goal. Further, the Exhibits illustrate displaying standard medical guidelines in response to a user's request. *See*, Exhibit A, Figures 1 and 5, and Exhibit B pages 1-12, and Forms 1 and 3 that describe all the elements of the above claims.

Regarding claims 7-9 and 25-27, Exhibits A and B disclose comprising converting the new weekly dose medication into daily doses based on a number of milligrams in a single pill, receiving from a user over the network a setting of a predetermined number of milligrams in a single pill as defined by the user, and the anticoagulation medication is low molecular weight heparin. Exhibit A, Figures 2 and 6, and Exhibit B, Form 2.

Additionally, Exhibits A and B disclose all of the elements of claims 11-18 and 28-34, including displaying a list of patients that are overdue for a scheduled visit as of a current date, and the scheduled visit is overdue if delayed more than a predetermined number of days, as defined by a user, relative to a current date. *See*, Exhibit A, Figure 1. Exhibit B, pages 17-26 and Form 3 disclose that the current information includes updated medication information, and automatically

claims 1, 21, and 37. Therefore, Applicant submits that he completed the invention, as embodied in claims 1, 21, and 37 prior to the effective date of Surwit, thus antedating this reference such that it is not prior art. Independent claims 1, 21, and 37 are therefore allowable.

Regarding dependent claims 2-5, 22-24, 38, and 39, Exhibits A and B disclose that the information received includes at least one of a patient's current weekly anticoagulation medication dose, current international normalized ratio, and international normalized ratio goal, the new weekly dose medication regimen is based on at least one of the patient's current weekly anticoagulation medication dose, current international normalized ratio, and international normalized ratio goal. Further, the Exhibits illustrate displaying standard medical guidelines in response to a user's request and that the new weekly dose medication regimen is calculated based on an equation customizable by each user.. *See*, Exhibit A, Figures 1, 5 and 7, and Exhibit B pages 1-12, and Forms 1 and 3 that describe all the elements of the above claims.

Regarding claims 7-9 and 25-27, Exhibits A and B disclose comprising converting the new weekly dose medication into daily doses based on a number of milligrams in a single pill, receiving from a user over the network a setting of a predetermined number of milligrams in a single pill as defined by the user, and the anticoagulation medication is low molecular weight heparin. Exhibit A, Figures 2 and 6, and Exhibit B, Form 2.

Additionally, Exhibits A and B disclose all of the elements of claims 11-19 and 28-35, including displaying a list of patients that are overdue for a scheduled visit as of a current date, and the scheduled visit is overdue if delayed more than a predetermined number of days, as defined by a user, relative to a current date. Further, the Exhibits disclose receiving a selection of preferences to

customize configuration of the web site. *See*, Exhibit A, Figure 1. Exhibit B, pages 17-26 and Form 3 disclose that the current information includes updated medication information, and automatically displaying medication interaction messages in response to receiving the updated medication information. Further elements disclosed are, displaying a list of patients scheduled for a visit on a current date, selecting a particular patient from the list of patients scheduled, generating a report of at least one of patient, physician, and clinic summary information, where the report is customizable as to which fields are to be included therein and in at least one of sorting and grouping of the fields included therein.

Regarding claims 20 and 36, Exhibits A and B disclose automatically calculating a scheduled return visit based on whether the new weekly dose medication regimen has changed relative to the current weekly anticoagulation medication dose. *See*, Exhibit A, Figure 1 and Exhibit B, page 27.

Additionally, claims 2-5, 7-9 and 11-20 depend from claim 1, claims 22-36 depend from claim 21 and claims 38 and 39 depend from claim 37. Thus, claims 2-5, 7-9, 11-20, 22-36, 38 and 39 contain all of the elements of the independent claims per 35 U.S.C. § 112, fourth paragraph. Further, MPEP § 2131 states that a “claim is anticipated only if each and every element as set forth in the claim is found... in a single prior art reference.” Thus, if the elements of claims 1, 21 and 37 are antedated, the reference is not prior art, and all of the above claims have elements not in the prior art, all of the listed independent and dependent claims are allowable.

Therefore, Applicant respectfully requests that the 35 U.S.C. § 102(e) rejection based on Surwit be withdrawn.

Thus, if the elements of claim 1 are antedated, the independent claim and the dependent claims depending therefrom are allowable. For all of these reasons, Applicant respectfully requests that the rejections under 35 U.S.C. § 103(a) be withdrawn.

CONCLUSION

In view of the above, each of the presently pending claims in this application is believed to be in immediate condition for allowance. Accordingly, the Examiner is respectfully requested to pass this application to issue.

The Examiner is respectfully requested to contact the undersigned at the telephone number indicated below once he has reviewed the amendment if the Examiner believes any issue can be resolved through either a Supplemental Response or an Examiner's Amendment.

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Respectfully submitted,

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